

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL023011	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING _____	(X3) DATE SURVEY COMPLETED 05/04/2023
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NAME OF PROVIDER OR SUPPLIER BROOKDALE SHELBY	STREET ADDRESS, CITY, STATE, ZIP CODE 1425 E MARION STREET SHELBY, NC 28150
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D 000	Initial Comments The Adult Care Licensure Section conducted an annual survey on May 3, 2023 to May 4, 2023.	D 000		
D 273	<p>10A NCAC 13F .0902(b) Health Care</p> <p>10A NCAC 13F .0902 Health Care (b) The facility shall assure referral and follow-up to meet the routine and acute health care needs of residents.</p> <p>This Rule is not met as evidenced by: Based on observations, interviews and record reviews, the facility failed to ensure referral and follow-up for 1 of 5 sampled residents (Resident #2) who had an order for a Podiatry referral due to thickened, yellow and painful toenails and a referral for Physical Therapy and Occupational Therapy.</p> <p>The findings are:</p> <p>Review of Resident #2's current FL2 dated 12/16/22 revealed: -Diagnoses included bipolar disorder, edema, hypertension, hypothyroidism, hyperlipidemia, osteoporosis and mild cognitive impairment of uncertain etiology. -Resident #2 was oriented. -Resident #2 was semi-ambulatory.</p> <p>Review of Resident #2's Resident Register revealed an admission date of 11/29/19.</p> <p>Telephone interview with the contracted Hospice provider on 05/03/23 at 12:12pm revealed: -Resident #2 was admitted under Hospice services on 12/02/21. -Resident #2 was discharged from Hospice services on 02/25/23.</p>	D 273		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE _____ TITLE _____ (X6) DATE _____

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D 273	<p>Continued From page 1</p> <p>Review of Resident #2's Primary Care Provider (PCP) admission History and Physical dated 03/17/23 revealed: -There was a referral to Podiatry to follow due to thickened, yellow, and painful toenails. -There was a referral for therapy to evaluate and treat for Physical and Occupational Therapy (PT and OT).</p> <p>Review of Resident #2's Primary Care Provider (PCP) admission History and Physical dated 03/17/23 under Assessment and Plan revealed: -Diagnoses of Parkinson's disease stating Resident #2 was at risk for falling due to greatly limited mobility which has declined per staff, and PT/OT evaluate and treat due to decline added. -Diagnoses of onychogryphosis (thickened, yellow and painful toenails), significant, involving all toenails, dried blood around one nail base on the right foot and request Resident #2 be added to the Podiatry list that services this building.</p> <p>Interview with Resident #2 on 05/04/23 at 3:00pm revealed: -She had any pain in her feet. -She had toenail discomfort. -She had not been seen regarding her toenails. -She would like someone to see her regarding her toenails.</p> <p>Observation of Resident #2's toenails, with the medication aide (MA) present on 05/04/23 at 3:19pm revealed: -The MA removed Resident #2's bedroom shoes and socks. -Resident #2's toenails on both feet were extremely thickened, yellowed with debris located on the sides and underneath the toenails. -Resident #2's right big toenail appeared to be</p>	D 273		

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D 273	<p>Continued From page 2</p> <p>lifted and partly detached with dried blood at the base and left side of her toenail.</p> <p>Attempted telephone interview with Resident #2's family member on 05/04/23 at 4:22pm was unsuccessful.</p> <p>Attempted telephone interview with Resident #2's PCP on 05/04/23 at 4:40pm was unsuccessful.</p> <p>Review of an email provided on 05/04/23 by the Health and Wellness Director (HWD) dated 03/20/23 at 3:30pm revealed:</p> <ul style="list-style-type: none"> -The email from the Podiatry provider to the Resident Care Coordinator (RCC) documented a new consent to treat form needed to be completed before Resident #2 would be scheduled to see the Podiatrist. -The email included an attached consent form to be completed and returned as soon as possible. -The email from the RCC to the Podiatry provider on 03/20/23 at 4:16pm documented the consent forms were emailed back to the Podiatry provider. -The email from the Podiatry provider dated 05/04/23 at 4:24pm was provided by the HWD stating Resident #2 should be on the podiatry schedule for the next visit. <p>Review of an email provided by the HWD dated 05/03/23 at 4:35pm revealed:</p> <ul style="list-style-type: none"> -The email from the HWD to the Therapy Manager requested that the Therapy Manager send the PT/OT order to the HWD that was received from Resident #2's PCP. -The Therapy Manager replied and stated no orders were received by Resident #2's PCP. -The Therapy Manager stated she remembered discussing this with the HWD. -On 05/03/23 at 4:59pm the Therapy Manager emailed HWD that she had received the orders 	D 273		

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D 273	<p>Continued From page 3</p> <p>for PT/OT that was sent by the HWD and stated she did not receive the PT/OT orders in March 2023.</p> <p>-On 05/04/23 at 10:24pm the Therapy Manager emailed the HWD stating that the Therapy Department should be able to admit Resident #2 on 05/05/23.</p> <p>Review of the facility's Skin Assessment Form dated 03/28/23 revealed:</p> <p>-There was no documentation related to Resident #2's feet or toenails.</p> <p>-There was no documentation that Resident #2's feet or toenails were assessed.</p> <p>Interview with the HWD on 05/04/23 at 5:22pm revealed:</p> <p>-She did not know Resident #2 did not have a Podiatry, Physical Therapy or Occupational Therapy referral made.</p> <p>-Therapy referrals were emailed to the contracted in-house Therapy Group.</p> <p>-The facility's contracted provider was responsible for making referrals.</p> <p>-Skin assessments were completed upon admission and quarterly by a Registered Nurse (RN).</p> <p>-She and the RCC were responsible for reviewing the PCP's visit notes when received.</p> <p>-The PCP notes usually were not available until two to three days after the PCP visit was made.</p> <p>-The PCP did not always communicate new orders or referrals prior to leaving the facility on visit days.</p> <p>Interview with the Administrator on 05/04/23 at 5:16pm revealed:</p> <p>-She did not know Resident #2 did not have a Podiatry, Physical Therapy or Occupational Therapy referral made.</p>	D 273		

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D 273	Continued From page 4 -She expected the staff or the facility's contracted provider to make referrals. -The expected the PCP and staff to communicate with each other regarding new referrals or orders. -She was not sure how often skin assessments were completed on residents. -She expected staff to report any skin issues to the HWD or to the RCC.	D 273		